



PHILIP L. BROWNING
Director

**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

April 30, 2012

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

A handwritten signature in black ink, appearing to be "P. Browning", is written over the printed name and title of Philip L. Browning.

Board of Supervisors
GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
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Third District
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Fourth District
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Fifth District

**LITTLE PEOPLE'S WORLD GROUP HOME CONTRACT COMPLIANCE
MONITORING REVIEW**

The Out-of-Home Care Management Division (OHCMD) conducted a review of the Little People's World Group Home (GH) in April 2011, at which time they had three six-bed sites and one ten-bed site with a total of 19 placed Los Angeles County DCFS children. The placed children's average length of placement was five months and the average age was ten.

The Little People's World GH has sites located in the 2nd Supervisorial District and Riverside County and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to the Little People's World GH program statement, its goal is "to increase the likelihood that young children in crisis will be provided an opportunity for successful return home or placement in less restrictive setting, conducive toward legal permanency." Little People's World Group Home is licensed to serve the capacity of 28 males, ages 6 through 12, which includes children from other counties.

For the purpose of this review, six currently placed children were interviewed and their case files reviewed. The placed children's overall average length of placement was five months and the average age was ten. Five discharged children's files were reviewed to determine if they were meeting their Needs and Services Plan (NSP) goals and

discharged per their permanency plan. Five staff files were reviewed for compliance with the Title 22 regulations and contract requirements.

There were six children on psychotropic medication. We reviewed their case files to assess the timeliness of the Psychotropic Medication Authorizations (PMA) and to confirm the documentation of psychiatric monitoring was maintained as required.

SCOPE OF REVIEW

The purpose of this review was to assess Little People's World Group Home's compliance with the contract and State regulations. The visit included a review of GH's program statement, administrative internal policies and procedures, six children's case files, and a random sampling of personnel files. A visit was made to the sites to assess the quality of care and supervision provided to the children and we conducted interviews with children to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

The children interviewed indicated they were provided with good care and appropriate services, were comfortable in their environment and were treated with respect and dignity. The children's case files and personnel files were well organized and professionally maintained. The sites were clean and adequately landscaped. All six children interviewed stated they felt safe.

At the time of the review, the GH needed to address physical plant deficiencies, none of which posed a safety hazard to any placed children. In addition, the GH needed to address timely submission of Serious Incident Reports (SIRs) to OHCMD, develop comprehensive Needs and Services Plans (NSPs) and allow the children to select their own clothing. Although initial dental exams were late for two children, the dentist provided letters to show that there was a scheduling problem for one child and the other child was acting out at the time and could not receive his exam.

The Little People's World GH was in substantial compliance with the contract program statement and regulatory standards reviewed, scoring an overall 95% level of compliance. Based on our review, the few deficiencies revealed the need for more thorough documentation in the NSPs, maintain the common areas and ensure that the children are making progress in their NSP goals.

The Assistant Executive Director, Administrator, Facility Managers and their staff were accessible and willing to make the necessary corrections regarding the findings highlighted during the review.

NOTABLE FINDINGS

The following are the notable findings of our review:

- SIRs were not submitted timely via the I-Track tracking system to DCFS. The OHCMD Monitor brought this matter to the attention of the Executive Director and the Facility Managers and a Corrective Action Plan (CAP) was requested specifically to address this concern. The CAP was provided and included training for the staff to familiarize them with the SIR protocol per the Group Home Contract, Exhibit A-VIII.
- Five of the six initial NSPs were reviewed, as one initial NSP was previously reviewed in 2010, and ten updated NSPs were reviewed. Three of the five initial NSPs were comprehensive and met all the required elements in accordance with the NSP template. Two initial and ten updated NSPs were not comprehensive and did not meet all the required elements in accordance with the NSP template. Of the deficient NSPs, one initial NSP did not have detailed documentation on the visits between the child and his family; one initial and one updated NSP did not have the date for the psychotropic medication court authorization; and some updated NSPs did not have detailed information on the GH contacts with the DCFS Children's Social Workers (CSW).
- Two children disclosed that they were not involved in the selection of their clothing. The Facility Manager stated the GH always encourage the children to select their own clothes but at times, children have to be helped in choosing appropriate clothing.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held April 28, 2011:

In attendance:

Toni Hodges, Salina Hysaw, Facility Managers, Little People's World Group Home; and Kirk Barrow, Monitor, OHCMD DCFS.

Highlights:

The Facility Managers were in agreement with the findings and recommendations and indicated that the GH would follow up with their staff to ensure that they continue to improve on their documentation in the NSPs to ensure that the NSPs are comprehensive, children participate in selecting their clothing, and that common quarters are well maintained.

As agreed, the Little People's World GH provided a written CAP addressing each recommendation noted in this compliance report. The approved CAP is attached.

As noted in the monitoring protocol, a follow-up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations.

If you have any questions, please call me or your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:RS:KR:
EAH:PBG:kb

Attachments:

- c: William T Fujioka, Chief Executive Officer
- Wendy Watanabe, Auditor-Controller
- Jerry E. Powers, Chief Probation Officer
- Public Information Office
- Audit Committee
- Sybil Brand Commission
- Halima McClinton, President Board of Directors, Little People's World
- CSJ Kidogo, Executive Director, Little People's World
- Jean Chen, Regional Manager, Community Care Licensing
- Lenora Scott, Regional Manager, Community Care Licensing
- Linda Calhoun, Program Manager, Community Care Licensing

**LITTLE PEOPLE'S WORLD GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW-SUMMARY**

**727 S. Harris Street
Compton, California 90220
License Number 191670240
Rate Classification Level 12**

**704 N. Kalsman Street
Compton, California 90221
License Number 191600851
Rate Classification Level 12**

**39514 Brookside Ave.
Cherry Valley, California 92223
License Number 330910409
Rate Classification Level 12**

**276 N. Allen Street
Banning, California 92220
License Number 336402541
Rate Classification Level 12**

	Contract Compliance Monitoring Review	Findings: April 2011
I	<u>Licensure/Contract Requirements</u> (9 Elements) <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Transportation 3. SIRs 4. Compliance with Licensed Capacity 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Allowance Logs 8. CCL Citations/OHCMD Investigation Reports on Safety/Plant Deficiencies 9. Detailed Sign In/Out Logs for Placed Children 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance
II	<u>Facility and Environment</u> (6 Elements) <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non-Perishable Food 	<ol style="list-style-type: none"> 1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance

III	<u>Maintenance of Required Documentation and Service Delivery</u> (13 Elements) <ol style="list-style-type: none"> 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Children Progressing Toward Meeting NSP Case Goals 6. Development of Timely Initial NSPs 7. Development of Comprehensive Initial NSPs 8. Therapeutic Services Received 9. Recommended Assessment/Evaluations Implemented 10. DCFS CSWs Monthly Contacts Documented 11. Children Assisted in Maintaining Important Relationship 12. Development of Timely Updated NSPs 13. Development of Comprehensive Initial/Updated NSPs 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Improvement Needed 7. Full Compliance 8. Improvement Needed 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Improvement Needed
IV	<u>Educational and Workforce Readiness</u> (8 Elements) <ol style="list-style-type: none"> 1. Children Enrolled In School Timely 2. Children Attending School 3. Children Facilitated In Meeting Educational Goals 4. Children's Academic or Attendance Increase 5. Current IEPs Maintained 6. Current Report Cards Maintained 7. YDS/Vocational Program Opportunities Provided 8. GH Encourage Children's Participation in YDS 	Full Compliance (ALL)
V	<u>Health and Medical Needs</u> (6 Elements) <ol style="list-style-type: none"> 1. Initial Medical Exams Conducted 2. Initial Medical Exams Timely 3. Follow-Up Medical Exams Timely 4. Initial Dental Exams Conducted 5. Initial Dental Exams Timely 6. Follow-Up Dental Exams Timely 	Full Compliance (ALL)
VI	<u>Psychotropic Medication</u> (2 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	Full Compliance (ALL)

VII	<p><u>Personal Rights And Social/Emotional Well-Being</u> (15 Elements)</p> <ol style="list-style-type: none"> 1. Children Informed of Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Fair Consequences 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed About Their Medication 11. Children Aware of Right to Refuse Medication 12. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 13. Children Given Opportunities to Plan Activities 14. Children Participate in Activities (GH, School, Community) 15. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities 	Full Compliance (ALL)
VIII	<p><u>Personal Needs/Survival And Economic Well-Being</u> (8 Elements)</p> <ol style="list-style-type: none"> 1. \$50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Ethnic Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance/Earnings 8. Encouragement and Assistance with Life Book 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance
IX	<p><u>Discharge Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Children Discharged According to Permanency Plan 2. Children Making Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement 	<ol style="list-style-type: none"> 1. Full Compliance 2. Improvement Needed 3. Full Compliance

X	<u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u> (12 Elements) 1. DOJ Submitted Timely 2. FBI Submitted Timely 3. CACIs Timely Submitted 4. Signed Criminal Background Statement Timely 5. Education/Experience Requirement 6. Employee Health Screening Timely 7. Valid Driver's License 8. Signed Copies of GH Policies and Procedures 9. Initial Training Documentation 10. One-hour Child Abuse and Reporting Training 11. CPR Training Documentation 12. First Aid Training Documentation 13. On-going Training Documentation 14. Emergency Intervention Training Documentation	Full Compliance (ALL)
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LITTLE PEOPLE'S WORLD GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

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License Number 336402541
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The following report is based on a "point in time" monitoring visit. This compliance report is only intended to report the findings noted during the April 2011 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of six children's files and five staff files, and/or documentation from the provider, Little People's World Group Home was in full compliance with five of the ten sections of our Contract Compliance review; Education and Workforce Readiness; Personal Rights and Social/Emotional Well-Being; Health and Medical Needs; Psychotropic Medication; and Personnel Records. The following report details the results of our review:

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of six children's files and five staff files, and/or documentation from the provider, Little People's World GH fully complied with eight of the nine elements reviewed in the area of Licensure/Contract Requirements.

Based on our review, Little People's World Group Home was in compliance with the licensing capacity, conducted disaster drills and maintained completed disaster drill logs. The GH notified DCFS within 24 hours of a child's relocation to another site. The GH provided children's transportation needs, and appropriate and comprehensive allowance logs were maintained.

The GH maintained runaway procedures in accordance with the contract and maintained detailed sign in/out logs for placed children. However, during our review, we noted that appropriately documented Special Incident Reports (SIRs) were not submitted timely and cross-reported to all required parties. The Facility Managers stated they would immediately begin submitting SIRs via I-Track appropriately and train their staff on SIR reporting protocols.

Recommendation:

Little People's World Management shall ensure that:

1. SIRs are appropriately documented and cross-reported to all required parties via I-Track in a timely manner.

FACILITY AND ENVIRONMENT

Based on our review of six children case files and/or documentation from the provider, Little People's World Group Home fully complied with five of the six elements reviewed in the area of Facility and Environment.

The exterior of the GH was well maintained. The front and back yards were clean and adequately landscaped. The mattresses on the children's beds were comfortable, and all the beds had a full complement of linens, adequate lighting, window coverings, storage space and age-appropriate decorations. The GH maintains sufficient recreational equipment in good condition. The GH maintains sufficient quantity and quality of reading materials, educational resources and supplies, including computers that are readily available to children. Children's sleeping arrangements were appropriate and the GH provided a home-like environment and maintained a sufficient supply of perishable and non-perishable foods. However, one burner for the stove was not working in the kitchen at the Harris site. The Facility Manager stated she would have the stove repaired immediately.

Recommendation:

Little People's World Group Home Management shall ensure that:

2. The common quarters are well maintained.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of six children's files and/or documentation from the provider, Little People's World GH fully complied with ten of the 13 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

Based on our review, we noted that placed children met the GH's population criteria as outlined in its program statement. The GH obtained DCFS CSWs authorization to implement the NSPs, age-appropriate children participated in the development of the NSPs, and the NSPs are implemented and discussed with the GH staff. The initial and updated NSPs were timely, children were receiving required therapeutic services, and recommendations on required and/or recommended assessments/evaluations were implemented. DCFS CSWs are contacted monthly by the GH and the contacts are appropriately documented. The Agency assists the children in maintaining important relationships.

Five of six initial NSPs were reviewed, as one initial NSP was previously reviewed in 2010, and ten updated NSPs were reviewed. Three of the five initial NSPs were comprehensive and met all the required elements in accordance with the NSP template; however, two initial and ten updated NSPs were not comprehensive and did

not meet all the required elements. Of the deficient NSPs, one initial did not have detailed documentation on the visits the child had with his family; one initial and one updated did not have the date for the court authorization for psychotropic medication; and some did not have the detailed information on the GH contacts with DCFS CSWs. Additionally, we found that sampled children were not progressing toward meeting the NSP case goals. The Facility Manager stated the GH documented the progress the children were making in the Progress Notes; however, the Progress Notes reviewed by the monitor did not address the progress the children were making in their NSP goals. The Facility Manager stated that the GH would ensure that children's progress towards their goals is included in their NSPs.

Recommendations:

Little People's World Group Home Management shall ensure that:

3. The children are progressing toward meeting their NSP goals.
4. They develop comprehensive initial and updated NSPs.

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

Based on our review of six children's files and/or documentation from the provider, Little People's World Group Home fully complied with seven of the eight elements reviewed in the area of Personal Needs/Survival and Economic Well-Being.

Based on our review, the children reported that they received the required \$50 per month allowance for clothing. The clothing provided to children was observed to be of good quality and of sufficient quantity. Also, the clothing allowance logs and inventories confirmed that the requirements were being met. However, two children disclosed that they were not involved in the selection of their own clothing. The Facility Manager stated the Group Home always encourages the children to select their own clothes but at times, children have to be helped in picking clothes that are appropriate for them.

All children interviewed reported the GH provides them with the required minimum weekly allowance and they spend their allowance as they choose. The GH provided children with adequate personal care items and the children were encouraged and assisted in creating and updating a life book/photo album.

Recommendation:

Little People's World Group Home Management shall ensure that:

5. All children are involved in the selection of their clothes.

DISCHARGED CHILDREN

Based on our review of six children's files and/or documentation from the provider, Little People's World Group Home fully complied with two of the three elements reviewed in the area of Discharged Children.

The children who were placed in the GH for at least 30 days were discharged according to the permanency plan and the GH was using available resources to stabilize the placement prior to requesting the removal of the child. However, no progress toward meeting an NSP goal was documented for one child who was placed at least 30 days. The Facility Managers stated that children's progress is documented in the Progress Notes section of their case files; however, in the future they will ensure that the children's progress toward meeting their NSP goals is documented in their NSPs.

Recommendation:

Little People's World Group Home Management shall ensure that:

6. Documentation is maintained in NSPs for children placed who were at least 30 days indicating progress they made toward meeting their NSP goals.

PRIOR YEAR FOLLOW-UP FROM THE 2010 MONITORING REVIEW

Objective

Determine the status of the recommendations reported in the 2010 monitoring review.

Verification

We verified whether the outstanding recommendations from our 2010 review report issued February 28, 2011, were implemented.

Results

The OHCMD prior monitoring report contained 12 outstanding recommendations. Specifically, Little People's World GH was to ensure that all smoke detectors are working properly and maintain sufficient recreational equipment in good condition, books and educational resources are to be made available to the children. The GH is to develop comprehensive NSPs, obtain DCFS CSWs authorization to implement the NSP, ensure DCFS CSWs are contacted monthly and contacts are appropriately documented. All follow-up dental exams are to be conducted timely and all children, who are prescribed psychotropic medication, are to have a current court authorization for the medication. Also, children are encouraged and assisted with maintaining life books/photo albums. In addition, all direct care staff members should have a valid California Driver's License, current CPR training certification, and current emergency intervention training certification on file.

Based on our follow-up of these recommendations, Little People's World GH fully implemented ten of the 12 recommendations. Smoke detectors were working, sufficient recreational equipment was in good condition and books and educational resources were made available to the children. DCFS CSWs authorizations to implement NSPs were obtained, DCFS CSWs monthly contacts were appropriately documented and the children who were prescribed psychotropic medication had current court authorizations for the medication. Follow-up dental exams were conducted timely and children were encouraged and assisted with maintaining life books/photo albums. Furthermore, all direct care staff members had a valid California Driver's License, current CPR training certification and current emergency intervention training certification on file. However, Little People's World GH did not develop comprehensive NSPs and common quarters were not well maintained, as one burner for the stove was not working at the Harris site. As noted, a CAP was requested from the GH to further address the recommendations that were not implemented.

Recommendation:

Little People's World Group Home Management shall ensure that:

7. It fully implements the February 28, 2011 outstanding recommendations from the 2010 monitoring report, which are noted in this report as Recommendations #2 and #3.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Little People's World GH was posted by the A-C on December 6, 2011. The A-C identified \$182,387 in unallowable expenditures, and \$1,667 in unsupported/inadequately supported expenditures. According to DCFS Fiscal Monitoring Section, Little People's World signed an agreement with the Treasurer and Tax Collector to pay the identified unallowable expenditures.



PHILIP L. BROWNING
Interim Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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Fifth District

August 31, 2011

CSJ Kidogo, Executive Director
Little People's World
P.O. Box 5301
Compton, CA 90220

Dear Mr. Kidogo:

GROUP HOME COMPLIANCE REVIEW 2011 CORRECTIVE ACTION PLAN APPROVAL

We have reviewed your Corrective Action Plan (CAP) Addendum faxed to the Out-Of-Home Care Management Division (OHCMD) on August 29, 2011 for the Group Home Monitoring Review for 2011. The CAP is approved as written.

The Out-Of-Home Care Management Division (OHCMD) Monitor will be following up with Little People's World to ensure maintenance of the approved CAP.

Thank you for your cooperation. If you have any questions, you may contact me at (626) 569-6819 or Kirk Barrow, the monitor at (626) 569-6880.

Sincerely,


Dorothy Channel, Manager
Out of Home Care Management Division

DC:kb

C: Shannon Jones, Quality Assurance Director

LITTLE PEOPLES' WORLD, INC.**PO BOX 5301****COMPTON, CA. 90220****310-764-1546****JULY 15, 2011****RESUBMITTED: 08/08/2011****ATTENTION: DOROTHY CHANNEL, Manager OHCMD****Cc: KIRK BARROWS, Monitor****RE: GROUP HOME COMPLIANCE REVIEW 4/28/2011****CAP:****LICENSEURE/CONTRACT REQUIREMENTS**

3. In future LPW administrator will ensure that SIR's are done and submitted timely. QAD will log on to staff track to make there are no pending, incomplete or saved SIR's.

FACILITY AND ENVIRONMENT

11. Facility manager and Floor Supervisor will schedule any service or repairs that need to be done as soon as possible. Facility manages and Floor Supervisor will do facility checks daily. Administrator will do bi-weekly facility checks. Facility Managers will fill out all maintenance logs for all repairs. QAD will assure that all equipment in the sites is in proper working order.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

20./22. /28. Quality assurance Director will train facility social worker and managers on properly completing the NSP and make sure that social workers understand that they are not to cut and paste on this document. QAD along with facility Managers will review NSP before they are sent to CSW's to ensure all information is complete and correct. Although managers are keeping a running log of all contacts with CSW, managers will be sure to place all contacts with CSW on the NSP. All NSP will be written to reflect the client's needs according to the 709, TDM or RMP meetings. All NSP will show progress when applicable. When a client is having challenges making goals, goals will be modified. LPW staff, CSW, In house Social Worker and any other ancillary mental health service person will assist client in making his goals. These successes and assistance will be documented in the NSP report.

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

65. Children when age appropriate will accompany staff when shopping for their clothing and shoes. Client has gone shopping with staff to pick out his clothing and shoes. Facility manager will talk to the children to see what style of clothing they like and help them to develop their own since of style.

If you have any questions regarding this CAP please feel free to contact Shannon Jones QAD at 310-63.9-5021 or via e-mail ga@littlepeoplesworld.org.

Thank You,

Shannon Jones, QAD

Little Peoples World, Inc